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CONFIRMATION NO. 9561

<b>SERIAL NUMBER</b> 10/677,546	<b>FILING OR 371(c) DATE</b> 10/01/2003 <b>RULE</b>	<b>CLASS</b> 205	<b>GROUP ART UNIT</b> 1753	<b>ATTORNEY DOCKET NO.</b> P-US079-A-SC
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**APPLICANTS**

Adam L. Cohen, Los Angeles, CA;

**\*\* CONTINUING DATA \*\*\*\*\***This appln claims benefit of 60/429,485 11/26/2002 and claims benefit of 60/415,369 10/01/2002 *RV***\*\* FOREIGN APPLICATIONS \*\*\*\*\****None***IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

12/24/2003

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>W</i>				

**ADDRESS**

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**TITLE**

Multi-cell masks and methods and apparatus for using such masks to form three-dimensional structures

<b>FILING FEE RECEIVED</b> 617	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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